									Application or Docket Number						
•	PATENT A	RD	10/779422												
CLAIMS AS FILED - PART I (Column 1) (Column 2)									LEN		OR	OTHER			
TC	TAL CLAIMS		34					RATE FEE			RATE	FEE	l		
FO	R		NUMBER FILED		NUMBER EXTRA		٠	BASIC	FEE	385.00	OR	Basic Fee	770.00		
70	TAL CHARGEA	BLE CLAIMS	Ø¥ minus 20=		• 14			XS 9	đ		OR	XS18=	252	İ	
INC	EPENDENT CL	AIMS	7 minus 3 =					X43-		OR	X86*				
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+145=			+290=				
• If the difference in column 1 is less than zero, enter						olumn 2		TOTA	_		OR	TOTAL			
••	CLAIMS AS AMENDED - PART II										J ^C	OTHER	THAN		
9 7 (Column 1) (Column 2) (Column 3)									LLI	ENTITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HEGH NUM PREVIO PAID	BER	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	3/	Minus	- 31	4	•		X\$ 9	3		OR	XS182	<u> </u>		
	Independent	• 3	Minus	25		• 2		X43			OR	SKILL S	1400		
۲	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145	7		OR	+290=	17	Į.	
124 34 (4/2/04)									YAL FEE		OR	YOTAL ADDIT, FEE			
		(Column 1)	101	Colu		(Column 3)	. `]	
AMENDMENT B	,	CLAIMS REMAINING AFTER AMENOMENT		HIGH MUM PREVI PAID	BER OUSLY J	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE	ł	RATE	ADDI- TIONAL FEE		
	Total	3	Minus	4	34	• /	ľ	XS 9	Ĭ		OR	X\$18=		l	
	Independent	.5	Minus	1	7		1	X43	•		OR	X869	1	1	
ك	FIRST PRESE	J	1			OĐ.	+290=		1						
ANE								10	TAL		OR	TOTA		1	
									FEE		,	ADDIT. FE	E l eren	1	
<u></u>	2/2/	(Column 1)			mn 2) 但\$1	Column 3	ነ`			ADDI-	\		ADDI-	1	
F	14/28/07	AFTER AMENDMENT			OUSLY FOR	DITA		RAT	E	TIONAL FEE	l `	RATE	TIONAL	·l	
AMENDMENT C	Total	.23	Minus	-3	#		1	XS	7.		ОЯ	X\$18-		1	
E E	Independent	. 2	Minus	¿	5	•	1	X43	_		1.	V00_		1	
Z	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM]			1	OR	-	+	t	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.) s		Ø₽			1	
-	If the "Highest No	amber Previously P	ald For IN TH	IS SPACE IR RPACE	is less that	ru 30' euga. "3., Ru 30' euga. "3.		ADDIT.		L	ioù m bro	ADOIT. FE		┤	
	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. FORM PTO-579 (Rev 1993) FORM PTO-579 (Rev 1993)												<u> </u>		

FORM PTO-879 (Rev 1003)